

PATENT  
MAIL STOP ISSUE FEE  
0510-1135

IN THE U.S. PATENT AND TRADEMARK OFFICE

In re application of Allowed July 2, 2009  
Loris AMATHIEU et al. Conf. 9920  
Application No. 10/576,811 Group 1793  
Filed July 21, 2006 Examiner Paul MARCANTONI  
DENSE MORTAR BASED ON BINARY ETTRINGITE BINDER, COMPRISING AT  
LEAST ONE POLY(ALKYLENE OXIDE) COMB POLYMER AND AT LEAST ONE  
STRUCTURING ORGANIC RESIN

REQUEST FOR CORRECTED FILING RECEIPT

Assistant Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

July 9, 2009

Sir:

Receipt is acknowledged of the Filing Receipt for  
Serial No. 10/576,811.

It is requested that a new Filing Receipt be issued on which the last name of the third-named inventor, Lionel RAYNAUD, is correctly given as RAYNAUD (not Ray Naud), as shown by the accompanying originally-filed Application Data Sheet.

Respectfully submitted,

YOUNG & THOMPSON

Benoit Castel

Benoit Castel, Reg. No. 35,041  
209 Madison Street, Suite 500  
Alexandria, VA 22314  
Telephone (703) 521-2297  
Telefax (703) 685-0573

10/576811

Application Data Sheet

LAP12 Rec'd PCT/PTO 21 APR 2006

Application Information

Application Type:: National Stage  
Subject Matter:: Utility  
Suggested Classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?:: None  
Number of CD disks::  
Number of Copies of CDs::  
Sequence Submission?:: None  
Computer Readable Form (CRF):: No  
Number of copies of CRF:: 0  
Title:: DENSE MORTAR BASED ON BINARY  
ETTRINGITE BINDER, COMPRISING  
AT LEAST ONE POLY(ALKYLENE  
OXIDE) COMB POLYMER AND AT  
LEAST ONE STRUCTURING ORGANIC  
RESIN  
Attorney Docket Number:: 0510-1135  
Request for Early No  
Publication?::  
Request for Non-Publication?:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 5  
Small Entity?:: No  
Latin Name::  
Variety Denomination Name::  
Petition Included?:: No  
Petition Type::  
Licensed US Gov't Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent No  
Appl.?::

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: LORIS  
Middle Name::  
Family Name:: AMATHIEU  
Name Suffix::  
City of Residence:: SAINT-LAURENT-DE-MURE  
State or Province of Residence::  
Country of Residence:: FRANCE  
Street of Mailing Address:: 83, AVENUE JEAN MOULIN  
Address::  
City of Mailing Address:: SAINT-LAURENT-DE-MURE  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: 69720

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: BRUNO  
Middle Name::  
Family Name:: TOUZO  
Name Suffix::  
City of Residence:: LYON  
State or Province of Residence::  
Country of Residence:: FRANCE  
Street of Mailing Address:: 35, RUE DU DOCTEUR BONHOMME  
Address::  
City of Mailing Address:: LYON  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 69008

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: LIONEL  
Middle Name::  
Family Name:: RAYNAUD  
Name Suffix::  
City of Residence:: CORBELIN  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing HAMEAU LE MALLEIN  
Address::  
City of Mailing Address:: CORBELIN  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: 38630

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: DINA  
Middle Name::  
Family Name:: GAUTHIER  
Name Suffix::  
City of Residence:: NIEVROZ  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing 4, LOTISSEMENT LES BONNES  
Address::  
City of Mailing Address:: NIEVROZ  
State or Province of Mailing Address::

Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: 01120

**Correspondence Information**

Correspondence Customer 00466  
Number::

**Representative Information**

Representative Customer	00466
Number::	

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/FR2004/050529	10/22/04

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	03 50728	10/23/03	Yes

**Assignment Information**

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::